WHAT IS CLAIMED IS:

1. A method for treating a joint having first and second mating joint surfaces comprising the following steps:

removing at least a portion of the first joint surface so to expose a cancellous bone surface;

placing a bioresorbable implant between and in contact with the first and second joint surfaces so the implant initially keeps said exposed cancellous bone surface spaced apart from the second joint surface; and

using the joint;

whereby the cancellous bone surface initially forms fibroblast which progresses into fibrocartilage as the implant is resorbed so the fibrocartilage effectively replaces the implant during such resorption.

2. The method of claim 1 further comprising the step of selecting the bioresorbable implant made of a polymer of lactic acid.

3. The method of claim 2 wherein the selecting step is carried out by selecting a lactic acid copolymer.

4. The method of claim 1 further comprising the steps of:

estimating the period of time it will take for the fibroblast to progress into fibrocartilage; and

selecting the bioresorbable implant of a size, shape and material according to said period of time.

5. The method of claim 1 further comprising the step of ensuring the exposed cancellous bone surface and the surface of the bioresorbable implant placed against said bone surface have complementary surface shapes.

6. The method of claim 3 wherein the ensuring step includes the step of selecting curved surface shapes as said complementary surface shapes.

7. The method of claim 1 further comprising the steps of:

forming a cavity into the exposed cancellous bone surface; and

selecting a bioresorbable implant having a joint portion configured to fit between the first and second joint surfaces and a stem portion configured to fit within said cavity.

8. A method for treating a substantially non-weight bearing arthritic joint having first and second mating joint surfaces comprising the following steps:

removing at least a portion of the first and second joint surfaces so to expose first and second cancellous bone surfaces;

selecting a bioresorbable implant having first and second implant surfaces corresponding to the first and second cancellous bone surfaces;

placing the first and second implant surfaces of the bioresorbable implant between and against the first and second exposed bone surfaces; and

using the joint;

wherein the cancellous bone surfaces initially form fibroblast which progress into fibrocartilage at each said bone surface as the implant is resorbed, thereby effectively replacing the implant during such resorption.

9. The method of claim 8 wherein the selecting step is carried out by selecting said bioresorbable implant having a generally semi-spherical joint surface as the first implant surface.

10. The method of claim 8 further comprising the steps of:

estimating the period of time it will take for the fibroblast to progress into fibrocartilage; and

selecting the bioresorbable implant of a size and material according to said period of time.

11. A joint treating kit comprising:

a bioresorbable implant configured for positioning between and against first and second articular joint surfaces of a joint, a portion of at least the first joint surface being an exposed cancellous joint surface; and

instructions for surgically implanting said implant.

12. The kit of claim 11 wherein the implant is configured for use at the basal joint of the thumb.

13. The kit of claim 11 wherein the implant is configured for use with a non-weight bearing joint.

14. The kit of claim 11 wherein the implant is a polymer of lactic acid.

15. The kit of claim 14 wherein the implant is a lactic acid monopolymer.

16. An improved joint implant for surgical implantation against and between the articular surfaces of an arthritic joint, at least one of the articular surfaces being a resected surface, comprising:

an implant body made totally of a bioresorbable material.

17. The improved implant of claim 16 wherein the bioresorbable material is a polymer of lactic acid.

18. The improved implant of claim 17 wherein the bioresorbable material is a lactic acid monopolymer.

19. The improved implant of claim 16 wherein the implant body is configured for implantation at the basilar joint of the thumb.

20. The improved implant of claim 16 further comprising a bioresorbable stem extending from the implant body.

Sub a3

21. A method for treating at least one degenerated surface on a cancellous bone, the surface being one of first and second relatively movable surfaces defining a body joint, the method comprising the steps of resecting the bone to form a cancellous bone surface, maintaining a spacing between the cancellous surface and another one of the relatively movable surfaces of the body joint, permitting growth of fibroblast on the cancellous surface and conversion of the fibroblast into fibrocartilage, and maintaining at least a portion of the spacing during the permitting step and until the fibrocartilage forms a layer of fibrocartilage on the cancellous surface and defines at least one of the relatively movable surfaces of the bone joint so that thereafter relative movements between the first and second surfaces take place along the at least one surface formed by the fibrocartilage.

22. The method of claim 21 wherein the first maintaining step is carried out by placing a biocompatible insert against said surfaces.

23. The method of 21 wherein the first maintaining step is carried out by placing a bioresorbable implant between said surfaces.

Sub a4

24. A method for treating at least one degenerated surface on a cancellous bone, the surface being one of first and second relatively movable surfaces defining a body joint, the method comprising the steps of resecting the bone to form a cancellous bone surface, placing an implant between the first and second surfaces to thereby space the surfaces apart, permitting growth of fibroblast on the cancellous surface and conversion of the fibroblast into fibrocartilage, maintaining a spacing between the surfaces during the permitting step and gradually resorbing the implant during the permitting step so that, upon resorption of the implant, the fibrocartilage forms at least one of the movable surfaces.

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